

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

RESTORING AMERICAN LEADERSHIP PAC

ADDRESS (number and street)

PO BOX 3012

Check if different
than previously
reported. (ACC)

WINDERMERE

FL

34786

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00581504

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

CRATE, BRADLEY, T, MR.,

Type or Print Name of Treasurer

Signature of Treasurer

CRATE, BRADLEY, T, MR.,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

RESTORING AMERICAN LEADERSHIP PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		873656.03
(b) Cash on Hand at Beginning of Reporting Period.....	688472.18	
(c) Total Receipts (from Line 19)	15607.10	461819.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	704079.28	1335475.98
7. Total Disbursements (from Line 31).....	700664.24	1332060.94
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3415.04	3415.04
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	365000.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

RESTORING AMERICAN LEADERSHIP PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
07	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y
09	/	30	/	2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	225.99	182115.84
(ii) Unitemized	0.00	8923.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	225.99	191038.84
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5400.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	225.99	196438.84
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	250000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	15381.11	15381.11
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15607.10	461819.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15607.10	461819.95

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	38666.24	558576.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	38666.24	558576.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	635000.00	635000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	16998.00	128084.39
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	400.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	16998.00	128484.39
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	700664.24	1332060.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	700664.24	1332060.94

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	225.99	196438.84
34. Total Contribution Refunds (from Line 28(d))	16998.00	128484.39
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-16772.01	67954.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	38666.24	558576.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	15381.11	15381.11
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	23285.13	543195.44

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILCOX, TODD, , MR.,

Mailing Address 1900 SUMMIT TOWER BLVD.
 STE 650

City
 ORLANDO

State
 FL

Zip Code
 32810

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 PATRIOT CAPITAL

Occupation (for Individual)
 OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251355.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.5053

Amount of Each Receipt this Period

15.99

☐ Memo Item

IN-KIND: POSTAGE: SEE MEMO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILCOX, TODD, , MR.,

Mailing Address 1900 SUMMIT TOWER BLVD.
 STE 650

City
 ORLANDO

State
 FL

Zip Code
 32810

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 PATRIOT CAPITAL

Occupation (for Individual)
 OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251565.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.5074

Amount of Each Receipt this Period

210.00

☐ Memo Item

IN-KIND: PLACED MEDIA: SEE MEMO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

225.99

TOTAL This Period (last page this line number only)..... ►

225.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAMBRIDGE ANALYTICA, LLC

Mailing Address 1 WALES ALLEY
SUITE 300

City
ALEXANDRIA

State
VA

Zip Code
22314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4441.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

Transaction ID : SA15.4606

Amount of Each Receipt this Period

4441.11

☐ Memo Item

REFUND: PLACED MEDIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COX MEDIA GROUP

Mailing Address 8000 BELFORT PARKWAY

City

JACKSONVILLE

State

FL

Zip Code

32256

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA15.4608

Amount of Each Receipt this Period

500.00

☐ Memo Item

REFUND: EVENT REGISTRATION FEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLORIDA DEPARTMENT OF STATE

Mailing Address DIVISION OF ELECTIONS
R. A. GRAY BUILDING, ROOM 316

City

TALLAHASSEE

State

FL

Zip Code

32399

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA15.5078

Amount of Each Receipt this Period

10440.00

☐ Memo Item

REFUND: FILING FEE

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15381.11

15381.11

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. A. MILANO STRATEGIES

Mailing Address ANN MARIE MILANO

7491 N. FEDERAL HWY, SUITE C5143

City
BOCA RATONState
FLZip Code
33487Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4931**

Amount of Each Disbursement this Period

6400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ABE & LOUIES

Mailing Address 2200 GLADES ROAD

City
BOCA RATONState
FLZip Code
33431Purpose of Disbursement
CARD SERVICES: FACILITY RENTAL/CATERING SERVICES

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.5048**

Amount of Each Disbursement this Period

2130.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CARD SERVICES

Mailing Address PO BOX 13337

City
PHILADELPHIAState
PAZip Code
19101Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMOS

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4933**

Amount of Each Disbursement this Period

4601.96

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11001.96

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
WILCOX: IN-KIND: PLACED MEDIA

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.5080**

Amount of Each Disbursement this Period

210.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HYATT REGENCY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		14		2016

Mailing Address 225 E COASTLINE DRIVE

City
JACKSONVILLEState
FLZip Code
32202Purpose of Disbursement
CARD SERVICES: TRAVEL: LODGING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.5052**

Amount of Each Disbursement this Period

918.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ISAAC, ERIN, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		06		2016

Mailing Address 11107 SHADYBROOK DRIVE

City
TAMPAState
FLZip Code
33625Purpose of Disbursement
COMMUNICATION SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.4934**

Amount of Each Disbursement this Period

6800.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6800.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. KOSS, BRIAN, , ,

Mailing Address PO BOX 2753

City
WINDERMEREState
FLZip Code
34786Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2016

FEC Identification Number

C**Transaction ID : SB21B.4932**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. METEORIC MEDIA STRATEGIES

Mailing Address 317 EAST PARK AVE.

City
TALLAHASSEEState
FLZip Code
32312Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

FEC Identification Number

C**Transaction ID : SB21B.4936**

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PRINT HARMONY, LLC

Mailing Address 1551 102ND AVE. N

City
ST. PETERSBURGState
FLZip Code
33716Purpose of Disbursement
CARD SERVICES: PRINTING & DESIGN SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

FEC Identification Number

C**Transaction ID : SB21B.5050**

Amount of Each Disbursement this Period

1516.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4937**

Amount of Each Disbursement this Period

44.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4938**

Amount of Each Disbursement this Period

3517.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.5042**

Amount of Each Disbursement this Period

16.48

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3578.48

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2016

FEC Identification Number

C**Transaction ID : SB21B.5061**

Amount of Each Disbursement this Period

34.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2016

FEC Identification Number

C**Transaction ID : SB21B.5062**

Amount of Each Disbursement this Period

3616.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STAMPS.COM INC

Mailing Address 1990 E GRAND AVE.

City
EL SEGUNDOState
CAZip Code
90245Purpose of Disbursement
WILCOX: IN-KIND: POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

C**Transaction ID : SB21B.5082**

Amount of Each Disbursement this Period

15.99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3650.81

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. T-MOBILE

Mailing Address 150 W SR 434

City
ALTAMONTE SPRINGSState
FLZip Code
32714Purpose of Disbursement
CARD SERVICES: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5046

Amount of Each Disbursement this Period

 11.05☒ Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 900 BRENTWOOD RD NE

City
WASHINGTONState
DCZip Code
20066Purpose of Disbursement
CARD SERVICES: POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5044

Amount of Each Disbursement this Period

 25.80☒ Memo Item

Full Name (Last, First, Middle Initial)

C. WILCOX, TODD, , MR.,Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650City
ORLANDOState
FLZip Code
32810Purpose of Disbursement
IN-KIND: POSTAGE: SEE MEMO

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5054

Amount of Each Disbursement this Period

 15.99☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 15.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. WILCOX, TODD, , MR.,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650City
ORLANDOState
FLZip Code
32810Purpose of Disbursement
IN-KIND: PLACED MEDIA: SEE MEMO

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.5075**

Amount of Each Disbursement this Period

210.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILLIAMS, GREGORY, M., ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2016

Mailing Address 59 EQUINE DRIVE

City
CRAWFORDVILLEState
FLZip Code
32327Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.4935**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2210.00

TOTAL This Period (last page this line number only).....▶

39257.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. BRIAN MAST FOR CONGRESS

Mailing Address 2600 S DOUGLAS RD STE 900

City
CORAL GABLESState
FLZip Code
33134Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

FEC Identification Number

C C00579896**Transaction ID : SB23.5063**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARLOS CURBELO CONGRESS

Mailing Address 8724 SW 72ND ST

City
MIAMIState
FLZip Code
33173Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

FEC Identification Number

C C00546846**Transaction ID : SB23.5065**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR JOHN RUTHERFORDMailing Address 3030 HARTLEY ROAD
SUITE 120City
JACKSONVILLEState
FLZip Code
32257Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

RUTHERFORD, JOHN, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

FEC Identification Number

C C00615294**Transaction ID : SB23.5067**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Mailing Address 725 FIFTH AVENUE

City
NEW YORKState
NYZip Code
10022Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: 00

FEC Identification Number

C C00580100**Transaction ID : SB23.5070**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARCO RUBIO FOR SENATE 2016

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Mailing Address PO BOX 661537

City
MIAMIState
FLZip Code
33266Purpose of Disbursement
FEDERAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: FL

District:

FEC Identification Number

C C00620518**Transaction ID : SB23.5072**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4000.00

TOTAL This Period (last page this line number only).....▶

10000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input checked="" type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. WILCOX, TODD, , MR.,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650City
ORLANDOState
FLZip Code
32810Purpose of Disbursement
CANDIDATE LOAN REPAYMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB26.5092**

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILCOX, TODD, , MR.,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650City
ORLANDOState
FLZip Code
32810Purpose of Disbursement
CANDIDATE LOAN REPAYMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB26.5093**

Amount of Each Disbursement this Period

400000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILCOX, TODD, , MR.,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650City
ORLANDOState
FLZip Code
32810Purpose of Disbursement
CANDIDATE LOAN REPAYMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB26.5094**

Amount of Each Disbursement this Period

135000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

635000.00

635000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. BARBER, ANTHONY, , MR.,

Mailing Address 6820 S. GRANDE DRIVE

City
BOCA RATONState
FLZip Code
33433Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2016

FEC Identification Number

C **Transaction ID : SB28A.5028**

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BERRY, CHRISTOPHER, , MR.,

Mailing Address 157 ADLER POINT

City
OVIEDOState
FLZip Code
32765Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		06		2016

FEC Identification Number

C **Transaction ID : SB28A.4950**

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BOELKES, DEBRA, , MS.,

Mailing Address 11 SOUND POINT COURT

City
AMELIA ISLANDState
FLZip Code
32034Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2016

FEC Identification Number

C **Transaction ID : SB28A.5031**

Amount of Each Disbursement this Period

 250.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 1250.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. COATES, GARY, , MR.,Mailing Address 2295 NW CORPORATE BLVD.
#215City
BOCA RATONState
FLZip Code
33431Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	1		2	0	1	6		

FEC Identification Number

C**Transaction ID : SB28A.5032**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FITZPATRICK, DANIEL, J, MR.,

Mailing Address 5951 CAYMUS LOOP

City
WINDERMEREState
FLZip Code
34786Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	6		2	0	1	6		

FEC Identification Number

C**Transaction ID : SB28A.4955**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FITZPATRICK, SARAH, G, MRS.,

Mailing Address 5951 CAYMUS LOOP

City
WINDERMEREState
FLZip Code
34786Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	6		2	0	1	6		

FEC Identification Number

C**Transaction ID : SB28A.5012**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. LANG, STEPHEN, , ,

Mailing Address 9018 SPENCE COURT

City
GOTHAState
FLZip Code
34734Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2016

FEC Identification Number

C **Transaction ID : SB28A.5016**

Amount of Each Disbursement this Period

 2700.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MELKESSETIAN, HAIG, , ,

Mailing Address 1503 STUART RD

City
RESTONState
VAZip Code
20194Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2016

FEC Identification Number

C **Transaction ID : SB28A.4974**

Amount of Each Disbursement this Period

 350.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NIELAND, DAVID, C, MR.,Mailing Address 9715 W BROWARD BLVD.
#316City
PLANTATIONState
FLZip Code
33324Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2016

FEC Identification Number

C **Transaction ID : SB28A.5030**

Amount of Each Disbursement this Period

 500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 3550.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. PORTER, LEMAN, , ,

Mailing Address 2501 ALAQUA DRIVE

City
LONGWOODState
FLZip Code
32779Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2016

FEC Identification Number

C**Transaction ID : SB28A.5034**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REILLY, TIMOTHY, E, MR.,Mailing Address 1085 GULF OF MEXICO DRIVE
UNIT 602City
LONGBOAT KEYState
FLZip Code
34228Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2016

FEC Identification Number

C**Transaction ID : SB28A.5039**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RUMMELL, PETER, , ,

Mailing Address 2538 RIVER ROAD

City
JACKSONVILLEState
FLZip Code
32207Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2016

FEC Identification Number

C**Transaction ID : SB28A.5038**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. SIMONE, MARGARET, C, MS.,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		06		2016

Mailing Address 3500 EL CONQUISTADOR
UNIT 341City
BRADENTONState
FLZip Code
34210Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB28A.4993**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILCOX, HEATHER, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		06		2016

Mailing Address 3823 SANDSTONE COURT

City
NEW SMYRNA BEACHState
FLZip Code
32169Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C**Transaction ID : SB28A.5098**

Amount of Each Disbursement this Period

49.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILLIAMS, CARRIE, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		06		2016

Mailing Address 1531 N. PIERCE ST.
APT. 203City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB28A.4949**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1299.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RESTORING AMERICAN LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. WILLIAMS, ROBERT, , ,

Mailing Address 4463 BRITON COURT

City
WOODBIDGEState
VAZip Code
22192Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2016

FEC Identification Number

C**Transaction ID : SB28A.5006**

Amount of Each Disbursement this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILLIAMS, SUNCHA, , ,

Mailing Address 4463 BRITON COURT

City
WOODBIDGEState
VAZip Code
22192Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2016

FEC Identification Number

C**Transaction ID : SB28A.5019**

Amount of Each Disbursement this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2400.00

TOTAL This Period (last page this line number only).....▶

13499.00

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 24 OF 27

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5085

RESTORING AMERICAN LEADERSHIP PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)
WILCOX, TODD, , MR.,**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650

City

ORLANDO

State

FL

ZIP Code

32810

Original Amount of Loan

100000.00

Cumulative Payment To Date

100000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 18 / 2015

Date Due

M M / D D / Y Y Y Y

12/31/2018

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 25 OF 27

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5086

RESTORING AMERICAN LEADERSHIP PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)
WILCOX, TODD, , MR.,**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650

City

ORLANDO

State

FL

ZIP Code

32810

Original Amount of Loan

400000.00

Cumulative Payment To Date

400000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 30 / 2015

Date Due

M M / D D / Y Y Y Y

12/31/2018

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 26 OF 27

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5087

RESTORING AMERICAN LEADERSHIP PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)
WILCOX, TODD, , MR.,**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650

City

ORLANDO

State

FL

ZIP Code

32810

Original Amount of Loan

250000.00

Cumulative Payment To Date

135000.00

Balance Outstanding at Close of This Period

115000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 / 31 / 2015

Date Due

M M / D D / Y Y Y Y

12/31/2018

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

115000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 27 OF 27

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4342

RESTORING AMERICAN LEADERSHIP PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)
WILCOX, TODD, , MR.,N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 1900 SUMMIT TOWER BLVD.
STE 650

City

ORLANDO

State

FL

ZIP Code

32810

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 31 / 2016

Date Due

M M / D D / Y Y Y Y

12/31/2018

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

250000.00

TOTALS This Period (last page in this line only)..... ►

365000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.